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Alternative care



SOS CHILDREN'S
VILLAGES

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An SOS family spending a relaxed evening outside in their garden - SOS Children's Villages Thailand



SOS mother with her children - SOS Children's Villages Sri Lanka

1

The quality alternative care of children

A vibrant debate on child care has been gaining momentum over the past decades. It is the debate over the most suitable way to care for children who do not have parental care or are at risk of losing it. What kind of environment will be best for such children? How does one create this environment? How has the traditional, large-scale, institutional child care setting affected the holistic development of a child? What alternatives should we create? These questions have driven a growing movement called *deinstitutionalization* that has been calling for the complete closure of institutional child care facilities.

The profound negative impacts of placing children in institutions (often referred to as orphanages) is well documented. Research studies and numerous academic papers describe the manner in which a child's physical and psychological development are impeded by life in an institutional setting. The high turnover of poorly paid and unprepared

institutional staff, the lack of stable care givers, the high incidents of abuse and maltreatment, the lack of connection with kinship networks that enhance the child's sense of self, isolation from the broader community, and lack of control over their lives and over decisions which affect them are a few of the many reasons for the clarion call for a better way to care for children who have lost parental care or been separated from their biological families.¹

Over the last decade, national and international institutions and non-governmental organizations have increased efforts to address children's care. These initiatives have sought to strengthen and improve the care of children within families, prevent unnecessary family separation, and ensure quality care alternatives when family reunification is not possible or appropriate. The provision of formal or informal care for children without parental care – termed *alternative care* – and reform of the existing care system – referred to as *child care reform* – have become dominant aspects of the children's care agenda.²

¹ Manfred Nowak, *The United Nations Global Study on Children Deprived of Liberty* (New York: The United Nations, 2019), 496-563.

² Yusra Ribhi Shawar and Jeremy Shiffman, "The De-Institutionalization Debate and Global Priority for Children's Care" (Johns Hopkins University, 2020), 2.



A small girl sleeping peacefully in the warmth of her SOS mother, at SOS
Children's Village Phuket, Thailand

The global intent to provide optimal care for separated children has never been greater. Momentum to move children from child care institutions and into families is building, led by welcomed evidence and practical leadership from many sectors within child health, child protection, and social welfare.³

Niall Boyce, Editor-in-Chief of The Lancet Psychiatry, Jane Goddard, Editor-in-Chief of The Lancet Child & Adolescent Health, and Commission Chair Professor Edmund Sonuga-Barke, King's College London

What kind of care do children really need?

With over 70 years of dedicated experience in child care, we know that children have emotional and psychological in addition to material needs. Moreover, children come with a complex set of needs, which are unique to each individual. All these different requirements call for more nuanced, holistic and tailor-made care responses for children deprived of parental care. We have learned and seen that children thrive and succeed in life when they grow up in a certain kind of environment:

A nurturing and loving environment, where children can build (should they choose to) family-like relationships, true bonding and a sense of belonging – especially when reintegration with their families is not in their best interest or is not possible.

A stable caregiver or parent figure available to provide emotional support.

Supportive and enriching environment for children to grow into their strongest selves and stimulate individuation and development of self-reliance.

A stable, safe and secure environment where the child feels protected and able to express her/himself freely.

³ Niall Boyce, Jane Godslan, and Edmund Sonuga-Barke, "Institutionalization and Deinstitutionalization of Children: The Executive Summary from a Lancet Group Commission". *Lancet Child and Adolescent Health* (June 2020): 2, [https://doi.org/10.1016/S2352-4642\(20\)30089-4](https://doi.org/10.1016/S2352-4642(20)30089-4).

Here is where SOS Children's Villages steps in.

In accordance with the United Nations Convention on the Rights of the Child (UNCRC), we recognize the family as the best place for the upbringing of a child and therefore promote policies and practices supporting biological families and family re-unification. SOS Children's Villages supports families to prevent family breakdown and child abandonment. However, should separation of a child from his or her family become necessary as a last resort, SOS Children's Villages offers a range of innovative, suitable and tailored care solutions closest to a home and family experience and furthest from harmful institutional settings.

2

Our guiding framework



SOS Children's Villages endeavours to maintain the highest standards and globally accepted principles in child care. We therefore ensure that all policies, programmes and procedures are directly in line with the following globally recognized frameworks as well as internal guidelines. We also promote these principles across cultures, through local practice in all our member associations throughout the Asian region.

READ MORE: See book 1 for details on the following frameworks and their relevance to our work.

Global frameworks



The United Nations Convention on the Rights of the Child (UNCRC)

Focusing especially on the fact that children who have lost parental care have a right to quality alternative care, which is most appropriate to the child's situation.



The United Nations Guidelines for the Alternative Care of Children

Which in essence states that alternative care must be considered only when absolutely necessary, must be individually tailored to the needs of each child, must include safe and continuous attachment to a stable caregiver, and an affirming, stimulating environment with family-like relationships.



The United Nations Sustainable Development Goals (SDGs)

The SOS Strategy 2030 directly contributes to the SDGs very specifically with reference to improving national and social protection systems for vulnerable children and youth, fighting inequalities, strengthening youth employability and ending violence against children.

Internal frameworks

SOS Children's Villages Strategy 2030

In our Strategy 2030, there is a strong commitment to **innovate and grow alternative care and deepen its integration into the community**. Towards this end, we will:

- Further develop a range of community-integrated, gender-sensitive and cost-effective alternative quality care options based on the UN Guidelines for the Alternative Care of Children.
- Focus on community-integrated SOS families, quality foster care and care options for children in emergency situations.
- Empower and train care professionals⁴



⁴ *No Child Should Grow Up Alone: SOS Children's Villages Strategy 2030* (Austria: SOS Children's Villages International, 2016).



SOS Care Promise

The SOS Care Promise provides the foundation for ensuring consistent quality around the world, in highly diverse and often very challenging environments. It is an active promise which we live out daily, as the drive towards quality is never over.⁵

While the whole of our global mission is given form and substance by the SOS Care Promise, it is care commitments 2, 3 and 6 that give us the impetus to provide quality alternative care and care options that foster community integration.

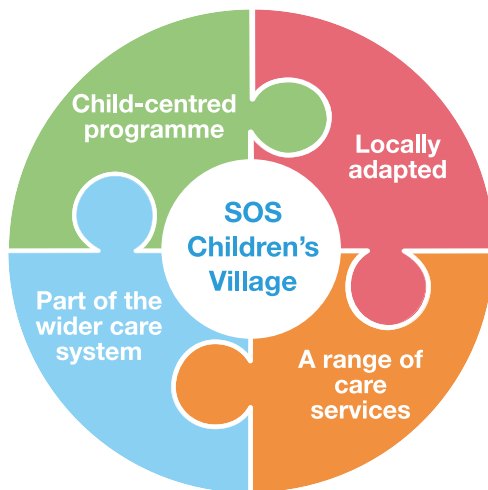
⁵ *SOS Care Promise: How SOS Children's Villages Ensures the Best Care for Children and Young People* (Austria: SOS Children's Villages International, 2018).

Care Commitment 2

We position the sos Children's village as a programme for child care and protection.

We commit to a long-term presence and locally adapted services in the communities where we work. Each of our programmes provides and promotes a range of quality alternative care options and family strengthening services. When necessary to meet otherwise unaddressed needs of our target group, we also provide healthcare, education and humanitarian emergency assistance.

CHARACTERISTICS OF AN SOS CHILDREN'S VILLAGE



Source: SOS Care Promise: How SOS Children's Villages Ensures the Best Care for Children and Young People. SOS Children's Villages International, 2018.



Biological siblings growing up happily together in a family in SOS Children's Village Cebu, Philippines



Care Commitment 3

We promote family strengthening and strong gatekeeping, and ensure the best care options for every child.

We commit to identify the most suitable care option for every child according to the child's best interests and in close collaboration with the responsible authorities.

Care commitment 3 keeps us focused on quality. It holds us down to not merely providing care but providing the very best care options. This in turn motivates us to cultivate and sustain a range of care options, recognizing the uniqueness of each child and rejecting a one size fits all approach.

FINDING THE BEST CARE OPTION



Source: *SOS Care Promise: How SOS Children's Villages Ensures the Best Care for Children and Young People*. SOS Children's Villages International, 2018.

Care Commitment 6

We enhance the integration of SOS families and vulnerable families in community life.

The aim is for children and young people to build strong social networks that can support them throughout their life.

Our programmes place a high priority on community integration. This means we strive to design care programmes in a manner that helps children stay connected to their communities and move with comfort and confidence between their SOS family and the wider community. Children are encouraged to stay in touch with parents, even visit them for some of the holidays, so they can move back in to their own communities when they leave care. Other facilities and programmes such as health clinics, kindergartens, schools, parenting skills training and counselling serve the wider community around the SOS Children's Villages and serve to integrate the SOS mission with the life of the community. In this way, the SOS Children's Village becomes a catalyst for development in the community.



© Jacob Staerk Jacobsen

A little kindergarten girl, barely tall enough to reach up, writing on the blackboard - SOS kindergarten Battambang, Cambodia

Integration into community life



Family autonomy
and caring family
environment

Access to services
and participation in
community life



Easy interaction
with neighbours



SOS families
living in the
community



Adapting
living
standards to
the local
context

Opening SOS services
and facilities (e.g.
counselling
services,
kindergarten



Source: *SOS Care Promise: How SOS Children's Villages Ensures the Best Care for Children and Young People*. SOS Children's Villages International, 2018.

SOS Gatekeeping User Manual

Gatekeeping is a process which ensures that children are admitted to the alternative care system only if all possible means of keeping them with their parents or wider (extended) family have been examined, and that the chosen care setting is the most appropriate for each child. It involves systematic and recognized procedures to screen referrals, assess need, authorize placement and follow up.⁶

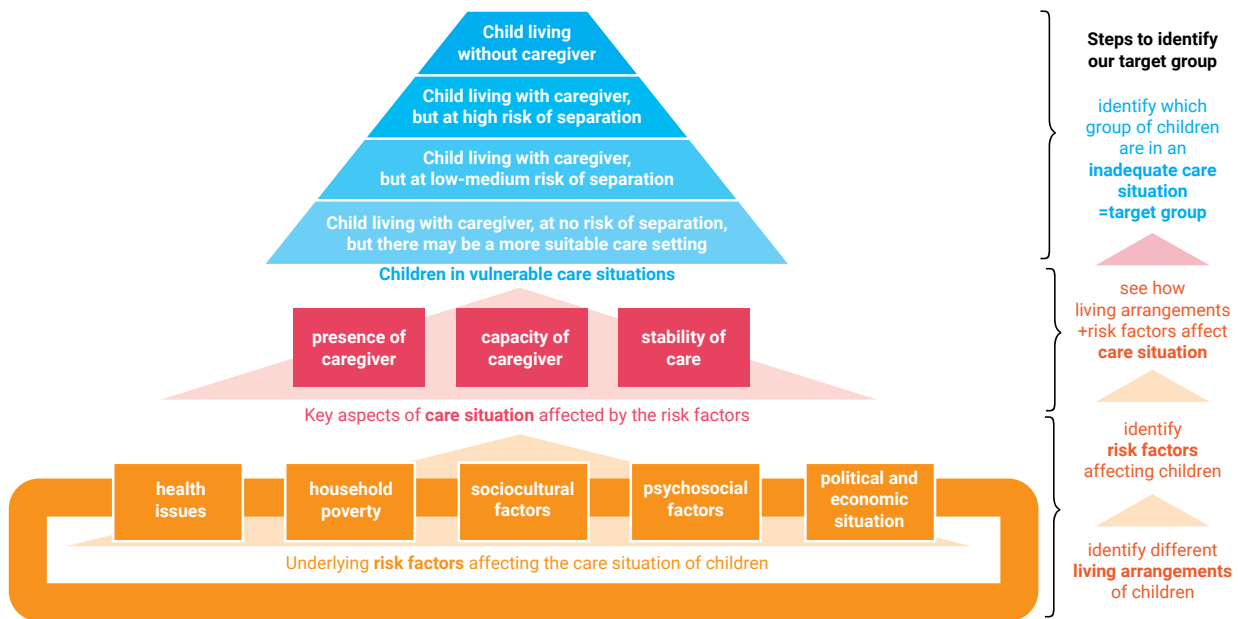
Ten gatekeeping guidelines

A robust, time-tested gatekeeping mechanism is built upon ten guidelines, which provide a firm foundation for all our efforts at quality care provision that is done according to best practice at all levels of interventions. The guidelines are presented in two parts.

⁶ Nigel Cantwell, Jennifer Davidson, Susan Elsley, Ian Milligan and Neil Quinn, *Moving Forward: Implementing the 'Guidelines for the Alternative Care of Children'* (UK: The Centre for Excellence for Looked After Children in Scotland, 2012), 68.

The first four gatekeeping guidelines look at what clarity is needed at a programme level, to provide a firm foundation for effective gatekeeping. This involves identifying and regularly reviewing which groups of children belong to our target group, especially focusing on children in different care situations within our target group, to maximize our impact. This also involves working according to guidelines already approved by member associations while we also position ourselves strategically to work with the State apparatus and other stakeholders in order to reach maximum effectiveness in gatekeeping.

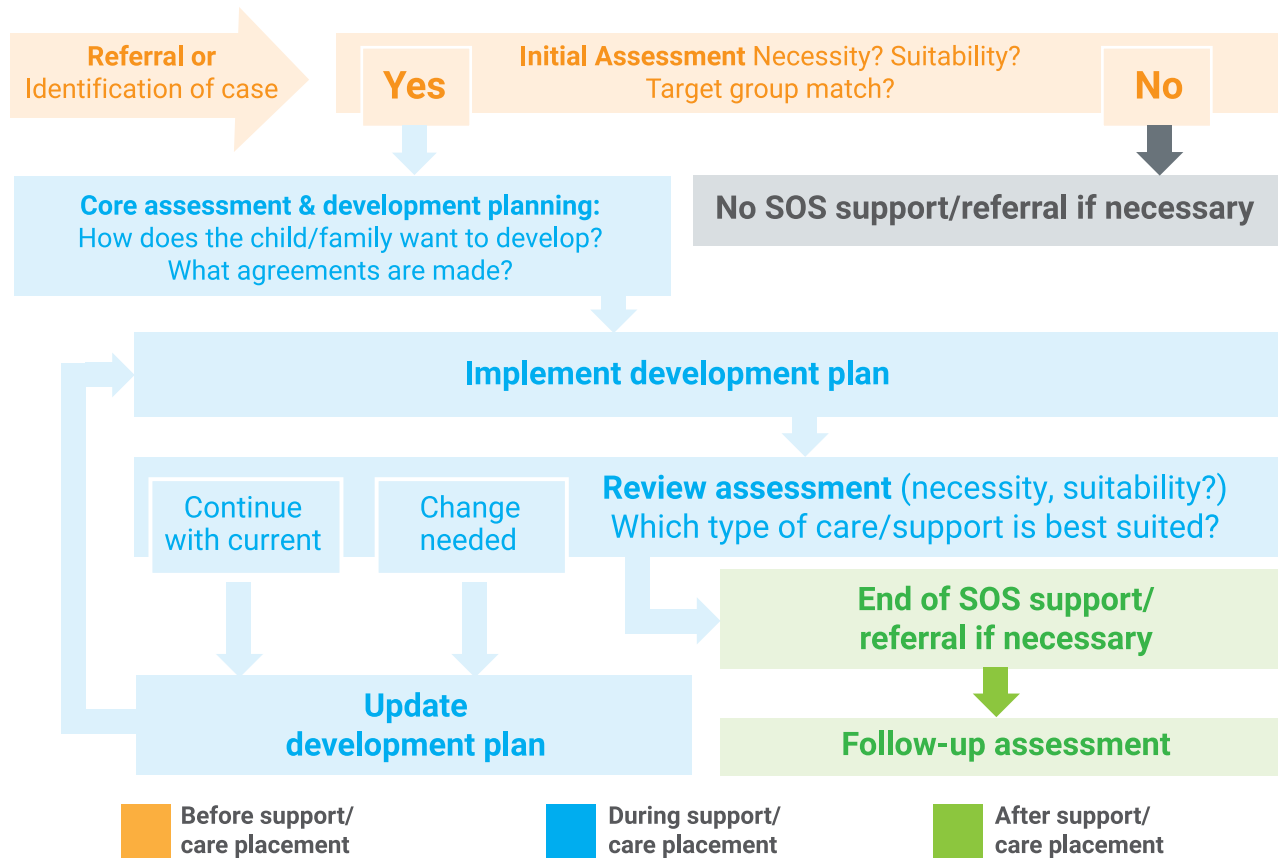
OVERVIEW OF STEPS TO IDENTIFY OUR TARGET GROUP



Source: Gatekeeping User Manual: Ensuring the Most Suitable Settings for Children without Adequate Parental Care. SOS Children's Villages International, 2019.

The next six guidelines focus on measures needed in order to ensure the most appropriate and suitable care setting for each individual child. These look at ensuring an individualized approach to each child's unique needs and by evaluating the child's situation and that of her/his family, the regular review of these needs and changing circumstances. We consider it important to prepare both the child and caregivers for any changes in living circumstances, and always try our best to reintegrate the child back in her/his own home and family when this is in the best interest of the child. Our up-to-date record keeping helps us in tracking the progress of families and children and this helps us make sound decisions based on evidence.

GATEKEEPING AS PART OF THE CASE MANAGEMENT APPROACH



Source: *Gatekeeping User Manual: Ensuring the Most Suitable Settings for Children without Adequate Parental Care*. SOS Children's Villages International, 2019.

Reintegration of children with their families and guiding considerations

We firmly believe in the reunification of children in our care with their biological families, when it is in their best interest. There are five key considerations we make when making a decision about the reintegration of children.

Consideration**1**

Assessment is a central prerequisite for the reintegration of a child with her/his family of origin. The assessment takes into consideration the child's readiness and desire to be reintegrated, the ability and space there is to identify and mitigate weaknesses and risks in reintegration. Finally, the impact of the reintegration is also assessed after the move is made in order to carefully monitor how reintegration is impacting the child and her/his progress.

Consideration**2**

Will reunification be in the best interests of the child, or not? This decision takes into account the individual child's circumstances, strengths, vulnerabilities and developmental needs. The process also considers the willingness and openness of parents and older siblings to accept other SOS services which support and evaluate the reunification process. These decisions are taken in collaboration with the child, her/his parents and other older family members as well as legal authorities.

Consideration**3**

Preparation for reintegration is a long-term process. It includes extensive preparedness, diligent follow up and is never a one-time event. The guidelines recommend that a minimum of 3-6 months of prior contact between the child and family must take place smoothly, though timelines are considered case by case. A reintegration plan is put in place tailored to each child's reality, facilitating the child's exposure to the community





After losing their mother at an earthquake that hit Nepal in 2015, Chaya and Shushma (not their real names) were handed over to SOS Children's Villages Nepal by their father who was severely injured himself. Three years later, the sisters were reunified with their father who maintained close contact with his two daughters over the years. They have also received a nice bonus mother and a little sister, and next door lives grandmother and uncle. Supported by the Sanothimi Family Strengthening Programme of SOS Children's Villages Nepal, the family is now doing well while the girls continue to attend the Hermann Gmeiner School, which gives them the opportunity to see their SOS siblings and friends regularly as well.

© Nina Rudd

at large. It encourages the child's engagement with the socio-cultural life of the community and holistic development.

Consideration

4

Reunification with the family necessarily means that the child's family is reinstated as the official guardian for the child. This may sometimes need official documentation which the family is required to agree and sign. This can be an emotionally charged event and as such is carefully designed, giving the child as much control over where she/he would like this to take place, and if there is to be a farewell party or a welcome party involved, and who will attend it. This is so that the child feels part of this decision and together with her/his family take responsibility for this move.

Consideration

5

Crucial to the success of the long-term reintegration process is the follow-up and monitoring that takes place to carefully monitor the child's wellbeing and development within the family and community. Face-to-face visits are the norm though phone calls and community support in this regard is also used. The monitoring process also involves mentorship and counselling which the child receives including the guidance to negotiate successfully this difficult transition. Parents too receive support/training to improve in their child rearing, and the family dynamics which initially caused the separation.

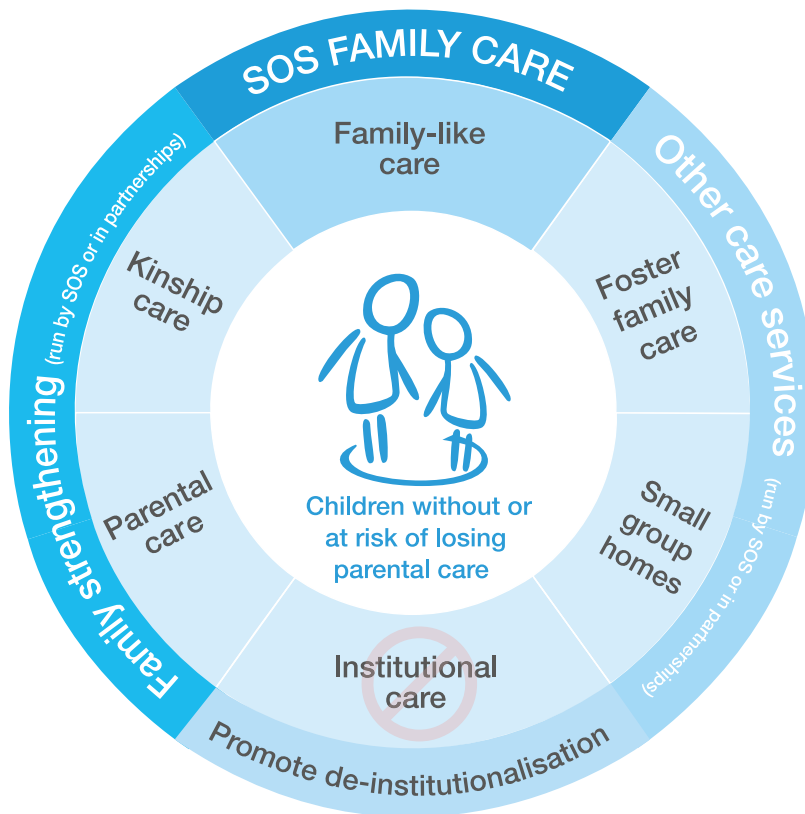
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Our range of care options



An SOS (foster) father from SOS Children's Village
Fukuoka, Japan, on the way to school with his two sons

PROMOTING AND PROVIDING A LOCALLY RELEVANT RANGE OF CARE OPTIONS



Source: SOS Care Promise: How SOS Children's Villages Ensures the Best Care for Children and Young People. SOS Children's Villages International, 2018.

We believe in providing a dynamic and constantly evolving range of care options from which stakeholders may select, with the best interest of each child and her/his local contexts in mind.

Children who have no one to care for them, or who need alternative care come from vastly varied socio-economic backgrounds and circumstances. It is our firm belief that we need to take into consideration each child's specific circumstances when we select the best care option for them among the ones we have available. Children who come to us come from a range of different backgrounds and life experiences as well as age-specific differences and requirements. This is why we strive to provide a range of care options, from quality short-term to long-term care alternatives, including family-like care. This is our way of ensuring the flexibility of care options required to address immediate and long-term development needs of each and every child who comes to us.

Family-like care

The hallmark of our mission

The hallmark of SOS Children's Villages' mission is that we provide a family-like growing up experience for children who do not have anyone to take care of them, or who come from dysfunctional families. When a child comes to live with us at an SOS Children's Village, they are home. Our children are cared for in small groups resembling an autonomous family, with four to eight other siblings and a well-trained, self-motivated mother who will remain the stable caregiver throughout the child's growing up years. The child is also given a vision for her/his life, and a plan to work on this vision. Growing up to self-reliance and becoming a productive member of society is part of that vision.



An SOS family, in front of their family house in SOS Children's Village Qiqihar, China



What is a children's village?

- 1** A unique collection of family houses situated in close proximity to each other. Each family house is a self-contained family unit consisting of one SOS mother and a group of four to eight children.
- 2** Children receive individual support and training according to tailored care plans preparing them to live independent lives and support themselves one day.
- 3** Sibling-like relationships are nurtured among the children in a family home, even when they all belong to different biological families. When children from the same family enter care, it is our policy to keep biological siblings together in the same SOS family as we are governed by the principle of keeping families together as far as is possible.
- 4** The SOS mother/parent who is an exceptional caregiver, is singularly committed to the children in their care right throughout their growing up years until they leave care. She is committed to her own growth and education as she must regularly attend training that keeps her well-equipped for raising the future generation. She is not alone in this as the SOS village community of other mothers and aunts step in to give mothers a break, or support during tough times, like when children fall sick.
- 5** The village director leads and coordinates all village activities. He supports the SOS mothers to ensure the wellbeing of the SOS families and promotes strong links between the youth homes and the SOS families. Day-to-day interactions with the children provide the opportunity for a positive relationship to grow between the village director and individual children. Many others including educators and youth co-workers support the village director in accomplishing a suitable care environment in the children's village where children and young people as well as their carers could thrive.



Children from SOS Children's Village Phnom Penh, Cambodia, playing tug-o-war while their mothers cheer them on

We believe the key to our success in raising well-adjusted, self-reliant, community-conscious children over several decades has been this unique composition provided within the family-like care model. A stable family environment, positive attachment with a committed caregiver, growing up alongside other children, simulated sibling relationships in a safe and stimulating shared home space are the trademarks of SOS Children's Villages across the world as much as in Asia.



At SOS Children's Villages, we live in a community, not only in a family. It's one big family!



The local government is a close and valued partner in our service provision through our children's villages. The support provided by local authorities include the recommendation of every child brought under our care, granting of the license to operate in the country, donation of land for the construction of children's villages and the provision of government subsidies.

12740

CHILDREN LOOKED AFTER IN FAMILY-LIKE CARE IN 121 CHILDREN'S VILLAGES IN ASIA, IN 2020

(Data as on December 31, 2020, excluding Tibetan Children's Villages and Tibetan Home Foundation)



Rohima with her biological child (to her right) and her SOS children

A beautiful blend of the professional and the personal

SOS mothers are an icon in the organization and the pivot on which the SOS family rests. Given the magnitude of the demands on this role, it was customary to invite women who had no children of their own to join as mothers. However, this meant that many of those who might have had excellent parenting skills could not apply for this role, and SOS Children's Villages might have been losing out on some effective mothers out there.



Guided by the declaration of the Senate of SOS Children's Villages (April 2015) that "mother and child must be enabled to remain together", six member associations around Asia, i.e. Bangladesh, Indonesia, Laos, Mongolia, Philippines and Viet Nam have implemented the practice of reunifying SOS mothers and aunts themselves with their own children by inviting them to bring their children over to the children's villages to share a home and life with their SOS families. This initiative has significantly improved the lives and quality of service of SOS biological mothers. The children have gained permanent homes, their mothers have gained immense relief and joy of being a mother to her own children and the SOS community has gained valued young members. Here is the story of one mother and her daughter from SOS Children's Villages Bangladesh.

Rohima Begum had a tough choice to make. She had just faced a change in her marital status, and was alone to make her life work again. She opted to work for SOS Children's Village Rajshahi as a mother, but in a curious twist of fate, this very vocation as a mother meant she had to leave her own child behind with her aged parents. This was her tough choice. Due to the need to earn a living and fend for

herself and her daughter, Rohima went ahead and accepted the job.

At the SOS Children's Village, it was bitter sweet. To care for so many children daily, hourly, and yet not to have the opportunity to do so for her own, was painful. She was constantly torn between two worlds in her heart and mind. She bore this through necessity, but her inner prayers might just have been heard. On a day that she will always remember, Rohima was told that the organization had decided to allow SOS mothers to bring in their own children to live with them in the SOS family house itself!

Rohima wasted no time in getting down Israt*, her daughter to live with her at last in the SOS Children's Village! Israt is now ten years old and enjoying the company of other brothers and sister in her SOS family. She has adjusted so well with each member of her new family under the watchful eye of her own mother who is never too far away. The other siblings too have quickly welcomed and incorporated Israt into their world. The staff team of SOS Children's Village Rajshahi is always standing by to support Rohima to keep a good balance in her relationships with all her children. Rohima's two worlds have finally become united.

* Name has been changed to protect the privacy of the child.

Family-like care and the young person leaving care

From their very first days with us in the SOS Children's Villages and in their SOS family, each child prepares for the day when she/he will leave care. This is a crucial measure of the success of the care model, and its ability to shape young people who can transition smoothly and integrate successfully in to their communities and indeed move into other parts of the world too with ease and confidence.

The young people in our care are provided with special programmes to enable them to increase their employability. They learn skills, get training in specific fields of their choice, receive constant guidance and counselling by mentors, and the opportunity to be a part of useful networks of other young people and potential employers. This is how we try to ensure that every young person who has grown up in a SOS family is well equipped and ready to step out and take life in their own hands.



A semi-independent youth from SOS Children's Villages Philippines cleaning the kitchen after preparing a meal



Independent and semi-independent living

Towards the final years in a child's stay in alternative care, the child who is now a young adult has been gradually trained to take on more responsibility for herself/himself and this includes living arrangements. No longer does the young person need to live under the shadow of a mother but is now capable of living alone in shared but independent accommodation with some limited supervision and guidance.

The semi-independent living programme supports young people over 18 years at the beginning of their independent life and provides limited support as they move towards full self-sufficiency. Young people who receive this kind of support enter into a formal agreement with the organization. They are largely responsible for their lives and live without a youth care co-worker who remains available only in a counselling and advisory role. Such support may be longer for young people with special needs.

This stage in independent living is an important milestone, which ensures that the young person has the skills necessary to make daily decisions by actively including them in day to-day tasks such as cooking, laundry, cleaning, budgeting and basic house maintenance. This

also involves significant decisions the young person is encouraged to make for herself/himself on where she/he would like to live, and if relevant, with whom. Independent living is the final stage in alternative care provision within the family-like care that we provide.

The leaving care and aftercare processes are thoroughly planned and implemented. Like in any family, the young person who has started an independent life can come back home to seek emotional, moral and/or financial support. The organization provides the youth care co-worker with the necessary resources so they can provide the young person with the required support. This could be time, space, financial means as well as additional professional or administrative support.

READ MORE: To learn more about how we support our youth in and leaving care, see book 4 on Youth Care.

My body may be limited but my will is soaring high

Sometimes our achievements are best captured through the real life encounters and stories of people whose worlds have been turned around. We would like you to meet Deepak from Nepal. His life is a powerful testimony to how we at SOS Children's Villages embrace disability. Deepak's story also illustrates why we believe that family-like care is an inclusive, stimulating and healing environment for a child with disability to grow up in. Our conviction is not, however, based on one mere story but in fact on two villages in Asia full of real life examples. Two SOS Children's Villages, one in Kajuri Kalan, Indian and the other in Jorparti, Nepal are dedicated to provide a family to children and young people with disabilities, including those with severe disabilities. Let Deepak tell you the rest.

I'm a care leaver with a difference and I want to tell you about it.

My name is Deepak and I was born in a rural part of Nepal. My earliest memories are of being carried to the hospital by my father and then watching every one struggle to help me because my legs wouldn't work. I was paralyzed waist down, and paralyzed for good. I still remember my father when he heard the doctor's diagnosis. It was tough for anyone to find enough money to make ends meet in those days, but with a disability it was even tougher.



Deepak on top of the world with his unwavering determination and spirit that broke all barriers

I hated watching how my parents had to struggle to provide even my basics. But then came the first breakthrough. My father who had been searching constantly for a place that would give me some opportunity, finally found the place that would turn my life around. It was the SOS Children's Village Jorpati, one of the two villages in all of Asia dedicated to children with disabilities. I was eight years old.

Here my life became active and meaningful. I was being taught and trained in how I saw myself and how I would in future deal with a world, which didn't quite know how to deal with me. But first I enjoyed going to school, and all the friends I had. I still cherish the wonderful memories of those happy days. With all the fun I had I'm not sure how, but I also managed to pass with a first division class! This got me to my second break in my life: college!

This was a bigger, amazing but tougher world. Having come from SOS Children's Village Jorpati where everyone was like me, suddenly, I was the only one in a wheel chair, the only one who couldn't do the stuff other youth were doing, the only one with a huge battle against a physical environment which was not ready for me or willing to accept my differences. I hated having to get help to go upstairs or get to the cinema or the shops or even access a washroom. My struggles were both physical and psychological. The daily challenges were multiple. But something in

me didn't know how to give in or give up. For this, I ended with a Degree in Architecture from Tribhuvan University of Nepal – the only wheelchair bound student to graduate in architecture.

College life had opened me up to the world. I was asking many questions now, about society, the world and its stereotypes, prejudices and stigma attached to people like me with mobility limitations and disabilities. I was constantly in deep reflection, grappling with how I could challenge these and help society accommodate people like me more readily and efficiently.

Then came my third break in life. It was a leadership course in Japan, sponsored by the Japanese government. When I set foot in Japan I never realized there was also a world where people like me were free, independent, could live with dignity, worth and value. For the first time in my life, I could go anywhere without asking for help, or having to be taken. I could visit any place I wanted because the infrastructure was built to accommodate me! This freedom and dignity felt so right, so good I wanted to package it and take it home with me! But instead, I had to only take the lessons in my head and create this freedom myself using my skills as an architect, the determination pushing me forward and the lessons from my past pain.

Back in Katmandu, I got to work. Pulling together some great, motivated friends,

I founded Independent Living Centre, an advocacy-based organization advocating for the rights of persons with disability. I searched for various tools and methodologies to make advocacy sharper and more powerful. This is when we hit upon sports as a tool in powerful advocacy. I had always had a passion for sports, which was nurtured back in my SOS days. Drawing on this passion, we inaugurated the Para Table Tennis Association, to give a space and a platform for people with disability to both play and challenge the world about their attitude to disability.

Today I am a man wearing many hats. I am the Deputy Secretary General of National Paralympic Committee of Nepal. I also work as an accessibility consultant and as a short-term consultant in the World Bank Group in its Earthquake Reconstruction Housing Project. I also occasionally practice as an architect privately, which is part of my regular life.

I often look back and wonder about how else my life would have turned out, if it hadn't been for the people and places that helped to drag me up from the clutches of disability and set me free to fly as high as I dreamed I could. I was fortunate enough in life to get that environment and opportunities to explore who I am, and my fullest potential. This is where my inner work began and this is why I am today where I am.

Reunification of children with their families of origin

We firmly believe that biological families are the best and healthiest forms of care and nature's best fit for the child. However, in an ever complex and fragmenting world, we have had to acknowledge that some biological families are just not equipped to raise their own children, due to various reasons. This may even be for a given period.

We have realized over years that sometimes, in some cases, all it takes is for some families to be given some time to heal and some additional support to strengthen themselves, after which they are able once again to reunite with their children and continue as a family.

This is why all of our care options are offered with a view to reintegrating the child into her/his community and reuniting with the family when they are stronger and ready for this, and whenever this is in the child's best interest. When undertaking for a child, we commit to the entire process and period of the child's growing up until she/he is able to independently care for her/himself or until the child can be reunified with her/his family of origin. In this way, we seek to minimize the fragmentation of families and strengthen family bonds. Social reintegration and family reunification of children are priorities in the SOS Children's Villages ethos.

3035

CHILDREN AND YOUTH LEFT CARE TO RETURN TO THEIR FAMILY OF ORIGIN BETWEEN 2000-2020

(Data as on December 31, 2020, excluding member
associations in China, Japan and South Korea)

A family supported under the family strengthening programme of SOS Children's Villages Sri Lanka

Every child and young person has the right to quality care and continuous protection within a nurturing family environment, regardless of whether he or she lives in the family of origin or in alternative care.

We are committed to fulfilling this right of the child, in all of our SOS Children's Villages scattered throughout Asia.



Helen (centre back), with her SOS family

A safe, warm place in a Storm

Helen* was nine years old when her father died. She lived with her mother and younger brother at the time. She remembers how this completely changed their lives. It was as if their whole world had turned upside down. Helen's mother did not have any



money to care for them, so they moved to the city to try and find a living, but things did not improve. In fact, they got worse. For Helen's mother, losing her husband, having to find a livelihood, care for two young children and a move to the city was all too much. She became very ill.

This is when someone kind introduced them all to SOS Children's Villages Mongolia. In 2014, along with her little brother, Helen was admitted to SOS Children's Village Ulaanbaatar. This was a significant turning point in all their lives. It gave Helen's mother a chance to get better, and it provided Helen and her little brother a stable home where they were well provided and cared for. Though living with the SOS family, Helen and her brother maintained a close and strong bond with their mother. She visited them and was immensely relieved to see them cared for so well. This also helped her to recover faster. Deep in their hearts, all they ever wanted was to get back together again like the old times. Spurred by this longing, Helen's mother recovered completely, and was soon well enough to care for her children again.

She approached the Child Admission Committee and discussed the idea of

getting back together as a family. The committee too was well aware of the core principles of SOS Children's Villages, which seeks to keep families together, and reunify them whenever safely possible. The Child Admission Committee connected with the local governor of the location where their mother lives and conducted a situation analysis. They realized it was entirely possible for this family to be reunified if they were given some support with livelihood. After further discussion, it was decided to provide Helen's mother with some livestock, which would enable them to earn sufficient to live comfortably together as a family.

Helen is now in grade 10 in school. She rushes home from school and the house smells of hot soup, which is steaming on the fireplace. Her mother and brother come in and they all sit down together for supper. Their happy chatter dies down as they eat hot soup. Silently they all think back to those dark days apart, which were like going through a storm. They also remember the welcoming home and family they had at SOS Children's Villages, which helped them make it through, and brought them back together. It was like a safe, warm place in a storm.

* Name has been changed to protect the privacy of the child.

Kinship care

An organic care option

In kinship care, we have perhaps the world's most ancient form of alternative care. Here, a child lives with members of her/his own extended family, older sibling, or even with family friends who are as close as family to the child. Kinship care is mostly informal and arranged privately. However, it can also be formally arranged by a child welfare authority.

According to the UN Guidelines for the Alternative Care of Children, kinship care is family-based care within the child's extended family or with close friends of the family known to the child, whether formal or informal in nature.⁷

We consider it the right of the child to grow up among her/his own people and those the child loves. Our role is to enable this process and support the extended family or relatives who undertake care to provide quality care, which is safe, stable and sustained.

Asia was the first region where SOS Children's Villages introduced kinship care into its range of care options, some 12 years ago. The pilot was implemented in partnership with the Government of Viet Nam. Member associations in Bangladesh, Cambodia, India, Indonesia, Nepal, Philippines, Sri Lanka and Viet Nam currently implement kinship care programmes, enabling children to grow up with next of kin in their families of origin.

⁷ United Nations General Assembly, *Guidelines for the Alternative Care of Children*, A/RES/64/142 (24 February 2010), Section 29 (c) (i), <https://digitallibrary.un.org/record/673583/?ln=en>.



Linh with her grandfather, supported by the kinship care programme of SOS Children's Village Da Nang, Viet Nam



What does kinship care provide?

1

This care option ensures that children maintain a vital connection to their biological extended family and those they are attached to.

2

Being with other family members and family friends helps them grow with a sense of identity and belonging.

3

We strongly promote reunification of children in our SOS families with their biological parents when and wherever safely possible. Kinship care greatly increases the likelihood of eventual reunification with birth parents.

4

It is less costly to taxpayers and keeps many children out of institutionalized care systems.

5

They are often able to go to the same schools, and be with the same friends and teachers.

6

They remain within and engaged with their wider communities.

How we support kinship care

In order to strengthen kinship care, we provide support to the families in a few crucial areas and have seen how this support can prevent the necessity for alternative care. This support also prevents separation of children from their kin-caregivers. There is enough evidence to conclude that households taking care of a kin-child are experiencing pressure. This is especially true for older woman-headed households, and those run by grandparents that take on the responsibility to care for children. Providing the following support services has demonstrated that kinship care can become a viable and highly effective form of alternative care.⁸

- **Income support and income generation programmes: helps the child and family stay together.**
- **Psychosocial support: specifically, with respect to people who have escaped conflict or war affected areas.**

- **Ensuring access to essential services: it is crucial to secure access to essential services for the children, to ensure that children have the necessary skills and experiences to integrate into society.**

- Access to schooling
- Access to health care services
- Access to child protection services

- **Legal Intervention as and when required: it is extremely important that all the children who are part of alternative informal care systems, have proper identification documents and that their legal status is clear.**

Continued contact with family or extended family members help build a sense of identity, and mitigates the stress that comes from re-location and the grief that is experienced due to separation from parents. Kinship care also ensures more stability as kinship carers are culturally and socially as close as possible to parental care, which can make adjustment easier and offer better chances of ongoing support. All this make kinship care one of the most recommended forms of care worldwide.

⁸ *Kinship Care as Informal Alternate Care for Children: A Study of Pilots on Kinship Care Projects by SOS Children's Villages Being Implemented in Asia region* (India: SOS Children's Villages International Office Asia, 2017).

1682

CHILDREN LOOKED AFTER IN KINSHIP
CARE IN 40 PROGRAMME LOCATIONS
IN ASIA, IN 2020

(Data as on December 31, 2020)



Lal Maya and her grandson are supported by the kinship care programme of SOS Children's Village Gandaki, Nepal

Enabling grandpa and grandma to raise the next generation

Prabhu* and his sister Neha* started life with loss and grief when both their parents died while they were still young. Fortunately, their grandparents took them over and tried their best to raise them, but the grandparents were only too aware of their own inabilities to provide adequately for the two grieving children.

"We are so worried, we are old but still have to go out and find daily work to earn something to feed these children, and we are not young at all to work and earn any more, what we earn is barely enough to feed us all, how can we afford to educate them?"

It is at this point that the family was linked with SOS Children's Villages of India, which then enrolled Prabhu and Neha in its kinship care programme in 2019. The kinship care programme places parentless children with their biological relatives or kinfolds and supports both

the children and the kinfold to raise the child well with financial assistance and other child rearing guidance and supervision, till the child is self-reliant.

This is what happened to Prabhu and Neha. The kinship programme took over the support of their education, health and nutritional wellbeing. A new life began for them all. A responsible person from the village was appointed as a mentor to Prabhu and Neha. The mentor also helped them with their studies. Within a few months, Prabhu was able to not only read and write but also construct complex sentences and solve math problems. He also became more confident and assertive. The children were getting beyond their dark days and were poised for a hopeful future. Their grandparents watched the transformation with wordless joy.

* Names have been changed to protect the privacy of the children.



Prabhu and Neha with their grandmother

Foster care

New roles, new relationships

According to the UN Guidelines for the Alternative Care of Children, foster care is when children are placed by a competent authority for the purpose of alternative care in the domestic environment of a family other than the children's own family that has been selected, qualified, approved and supervised for providing such care.⁹

In Asia, foster care is practiced by our member associations in Japan and Indonesia. In Japan, parents in SOS Children's Villages families become official foster parents, making them eligible for financial support from the State under local regulations. In the SOS Children's Village, there is a maximum of four children per family with one caregiver. In Indonesia, SOS Children's Villages provide support services to foster families in the community, including training and counselling. In addition, individual foster care, wherein an individual child is placed with foster parents, is being piloted for 50 children and youth by SOS Children's Villages India, in alignment with the foster care guidelines of the Government of India.

⁹ United Nations General Assembly, *Guidelines for the Alternative Care of Children*, A/RES/64/142 (24 February 2010), Section 29 (c) (ii), <https://digitallibrary.un.org/record/673583/?ln=en>.



18

**CHILDREN LOOKED AFTER IN
FOSTER CARE IN 5 PROGRAMME
LOCATIONS IN INDONESIA, IN 2020**

(Data as on December 31, 2020)

A new home for Indah

Things were not going too well in Indah's* home. There were many things even Indah didn't understand, that were troubling her mother. Neighbours watched and remarked about how stressed she was. Soon everyone realized that Indah's mother wasn't able to take care of her any more. Indah was just five years old.

Then one day some people came to her home and met with her mother. She didn't realize at the time, but they were people from SOS Children's Villages Indonesia who had brought along her new foster parents to help them identify a child they wanted to share their lives with. At first, Indah was afraid to leave her home. She would only realize much later in life why she had to leave. But for now her fears were met with warm and kind looks and soft assurances from her new foster parents. Slowly, Indah grew confident in her new home and started to really like her new life and her many new opportunities.

She goes to a kindergarten which is close to her new home, has many friends, and she even goes to the SOS Children's Centre regularly. There, Indah engages in many fun activities while the SOS educator supports her new foster parents and herself with adjustment to their new life as a family. He is friendly and Indah likes to talk to him as he makes her laugh!

Indah loves her new life and feels secure. She especially loves how her foster parents tuck her into bed and give her a warm, assuring hug every night. She loves this feeling of being cared for, protected and secure. She sleeps well with happy five-year-old dreams, knowing she has someone to protect her and love her.

* Name has been changed to protect the privacy of the child.



Indah telling her foster father all about what she learned at her kindergarten

Short-term care in small group homes



Girls at the SOS Small Group Home at Luang Prabang, Laos, enjoying a meal outside their home

Short-term care is an option with growing demand and value. These can include different types of settings including emergency shelters, which are places of safety to which a child or young person can be taken at short notice, from the care of her or his family for a limited period of time. It is a temporary living arrangement while the situation that caused the family separation is assessed and addressed. It can also include safe houses where children who are victims of trafficking or abuse are provided with temporary care in safe spaces, and transit centres where children are provided residential care when they have been separated from their parents or primary caregivers during emergency situations. Such centres are intended to be temporary and to be used while a child's

family is being traced and pending reunification. Transit centres can also provide temporary care for children and young people who are waiting for placement in a suitable alternative care setting or while receiving support in integrating into the community.

Small group homes is another short-term alternative care option where care is provided to a small group of children or young people by professional child and youth care workers working on shift or rotational basis. Usually, there is a focus on reintegration with the family of origin after a period of time once situations change for the better. In Asia, our only example of short-term care in small group homes comes from Laos.

Small Group Home of SOS Children's Villages Laos

SOS Children's Villages Laos started three small group homes in 2017, which has given shelter, safety, education and employability skills to over 50 young people in the provinces of Luang Prabang, Samneua and Savannakhet. Currently only one small group home is being run in Luang Prabang, supporting 13 children.

In Laos, this care option is used to safeguard vulnerable girl children between the ages of 14-18 who are at risk of falling prey to human traffickers and sexual exploitation because of poverty. The programme seeks to support these girls to successfully graduate general education, and learn a vocational skill for gainful employment, in order to reduce their economic, social and sexual vulnerability. Once a young person has graduated and learnt a skill, the next goal is the reunification with their own families. An SOS aunt looks after these young girls during their stay at the small group home.



A group of girls doing their school homework together, at the SOS Small Group Home at Luang Prabang, Laos



4 Community integration and additional services



Playing Holi in India. Often, SOS families celebrate festivals together with the families in the neighbouring community.

At SOS Children's Villages, we see community integration – both physical and social – as an important part of our role and identity. Therefore, we open up our services and facilities to the wider community, to become part of the community and share with it the richness we offer.

In many member countries in Asia, SOS Children's Villages and its programmes are now seen as very much a part of the community itself. Here is what we share beyond the boundaries of our children's villages: programmes for parents in the community, parenting skills, psychosocial counselling, schools, kindergartens, health clinics and hospitals and numerous other community activities such as sports and cultural events, which are sponsored, organized and mobilized by the SOS Children's Villages.

In times of natural disaster, SOS Children's Villages initiates emergency relief and disaster response for whole communities as a powerful catalyst for relief, reconstruction and reintegration in communities.

All of our member associations offer additional services to their communities outside of the children's villages. The most prominent of them are special services open to the community in education and health.

SOS Children's Village Srinagar:

A model of
**community
integrated families**

Jammu and Kashmir was a region formerly administered by India as a state from 1954 to 2019. The region has been a hot bed of turbulence and insurgency for more than a quarter century, rendering communities particularly vulnerable to poverty, violence, instability and fractured governance. Srinagar is the summer time capital of the Jammu and Kashmir region. SOS Children's Villages has consistently sought to enter into the toughest places in the world and the darkest periods in history to make significant changes in the lives of vulnerable children and youth in such circumstances. The presence of SOS Children's Village Srinagar has been no exception.



Children playing near a SOS family house situated in the Srinagar community

Yet, the SOS Children's Village Srinagar is a particularly unique project – it is an integrated village. This means that it is an improvised village which is still very much a part of the larger community. It constitutes a collection of rented buildings in the Srinagar community itself. *"We do not have our own infrastructure in Srinagar"*, says SOS Children's Village Srinagar management, referring to eight family houses, two youth houses and village facility, which are all located in the community and are rented.

Normal life in Srinagar is a very different normal. It is rife with political tension, and is generally disturbed due to constant calls for shut down or *bandh* (boycott), which are given by various groups at various times. In this context, maintaining a steady, relatively safe homestead and community has been a tremendous undertaking. This alternative approach to community living has been found viable and successful to date despite the chronic instability and risk that characterize the region.

As SOS Children's Village Srinagar leaders explain, *"Work in an improvised village is indeed full of challenges. When the families are separated from each other, the feelings of a big, united family takes longer to foster."* Maintaining the distinctive SOS culture in the family houses is not always easy when the

family homes are so closely entwined in the wider community.

However, SOS co-workers and mothers have once again risen to the challenge. They continue to navigate these challenges and have succeeded in maintaining smooth functioning family houses despite the constant upheavals around. *"We have now learned to be prepared and have all prior arrangements made. We can now ensure stable, safe care for our children and maintain the wellbeing of our children and mothers even during the time of bandh. We now plan and stock all provisions and essential items in our family houses during these times"*. It now comes naturally to SOS Srinagar! They realize that their children and youth too will watch, learn and grow in their own resilience as they see how SOS Srinagar families have learned to thrive in turbulent times.

SOS Children's Village Srinagar has made a significant impact, which has been hard to ignore. The evidence of all this? Work in Srinagar has been recognized and appreciated by both the government and the civil society. SOS Children's Village Srinagar has received a prestigious grant from the Government of Jammu and Kashmir which is testimony to the effectiveness of a unique model of integrated family houses and a great spirit of resilience.

Early childhood care and development

Early Childhood Development (ECD) programmes involve the provision of day care, crèche, kindergarten, and child minding for children between ages 0-8. A kindergarten is a pre-school sometimes also referred to as play school, which offers play and learning facilities to children aged 4-6 in a safe and guided environment.

A kindergarten is for most children their very first foray into the world outside their family and home. It is where they first encounter the world. In recognition of this, SOS Children's

Villages provides trained teachers, well-equipped spaces and especially tailored activities for pre-school age children to foster confident and inquisitive learning minds and creative spirits in a new generation. Kindergartens are open both to our own children from the SOS Children's Villages as well as to children from the community around the village. In this way, children in SOS care begin to relate to children outside of SOS Children's Villages from a very early age and the process of community integration begins right from this tender age.

5473

**CHILDREN RECEIVED
EARLY CHILDHOOD CARE,
DEVELOPMENT AND
EDUCATION IN 57 PROGRAMME
LOCATIONS IN ASIA, IN 2020**

(Data as on December 31, 2020)

Children engaged in a fun learning activity with their teachers, at the SOS kindergarten in Ben Tre, Viet Nam



A group of students experimenting in the laboratory,
at Hermann Gmeiner School Da Nang, Viet Nam

33307

**CHILDREN AND YOUTH
RECEIVED PRIMARY AND
SECONDARY EDUCATION
IN 40 HERMANN GMEINER
SCHOOLS IN ASIA, IN 2020**

(Data as on December 31, 2020)

Education

The Hermann Gmeiner Schools are the most prominent among a range of educational establishments founded by SOS Children's Villages worldwide. The majority of the member associations in Asia offer Hermann Gmeiner Schools at primary and secondary level. There are also Hermann Gmeiner Colleges (e.g. Bangladesh, India) and a Nursing School (e.g. India) through which SOS Children's Villages enriches and influences the world beyond the children's villages. Adult education is also offered in some Hermann Gmeiner Schools in the form of literacy trainings for adults, capacity building of teachers and for the leadership of schools.

Though founded initially to cater to children in SOS Children's Villages, these educational centres have become renowned and sought after with thousands of children from communities around the SOS Children's Villages attending. Hermann Gmeiner Schools are recognized as high calibre schools by the education authorities in the different countries our members are present in. Some schools work in partnership with the governments. These schools and colleges have become a crucial connector that links our children's villages to the world around them, and draws the community into the world of SOS Children's Villages.

Medical care, health promotion and prevention

Among a range of medical and health services initiated by SOS Children's Villages at community level are clinics, Nursing Homes and a variety of Mental Health and Psychosocial Support (MHPSS) services in emergencies as well as daily life. Counselling and support programmes are also offered for specific mental health and psychosocial issues, in areas such as life planning, reproductive/maternal health planning, and general issues such as hygiene/sanitation.¹⁰

Many of these services are offered not only to our own SOS children, mothers and care leavers but also to the communities around the SOS Children's Villages, some of which have poor access to state-run services due to geographic location or other economic factors. Communities serviced are often among the neediest. These services are the doorways that link us with communities around, bringing these communities closer to the mission and the families of SOS Children's Villages.

¹⁰ For details, visit <https://www.sos-childrensvillages.org/news/topics/childrens-health-care>

15173

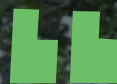
PEOPLE RECEIVED HEALTH CARE SERVICES IN 7 MEDICAL CENTRES IN ASIA, IN 2020

(Data as on December 31, 2020)



A child undergoing a dental check up at the medical centre at SOS Children's Village Piliyandala, Sri Lanka

5 Care professionals



My SOS mother is like my real mother if not more. The guidance and example she has given me on how to manage a family and support each other, and the advice she gave me during difficult times in life even after leaving her care gave me immense strength and confidence to lead an independent life. The positive disciplining used by my SOS mother is now helping me in disciplining my own children.

A care leaver from SOS Children's Villages Viet Nam



SOS mothers in SOS Children's Village Campot, Cambodia, spending some quality time together while embroidering beautiful tapestries for their homes

A mother like no other

The SOS mother is in truth, the heart of our global mission. She is one of a kind personality, in her unique role. SOS mothers do not sign up to a job; they commit to a lifetime of caring. While biological mothers raise two to three, or in rare cases four to five children, an SOS mother takes mothering to

spellbinding heights when she undertakes caring for 10, 20 or even 30 children in her lifetime. She is selected for her ability and willingness not only to care for her children throughout their entire childhood but she also commits to regular learning, training and upskilling to keep abreast of her ever-growing new generation.

ỦY BAN NHÂN DÂN THÀNH PHỐ HÀ NỘI
BAN TỔ CHỨC CUỘC THI VIẾT VỀ GƯƠNG ĐHTT, NTVT NĂM 2020

A conversation with Mother Sinh

from SOS Children's Villages Viet Nam

CUỘC THI VIẾT VỀ GƯƠNG ĐIỂN HÌNH TIỀN TIẾN
NGƯỜI TỐT, VIỆC TỐT NĂM 2020

Hà Nội, ngày 1 tháng 12 năm 2020



2033

SOS MOTHERS AND AUNTS
GAVE LOVING CARE TO
CHILDREN IN 121 CHILDREN'S
VILLAGES IN ASIA, IN 2020

(Data as on December 31 and
excludes Tibetan partnerships)

Mother Sinh with her daughter, after winning the state award for
her article 'The Mother of Superman', a tribute to her SOS mother

Q What made you chose to become an SOS Mother?

A I always loved children and wanted very much to have some of my own. I was born in 1978 and got married in 1999 with the hope of starting a family. It was a great blow to me when I was told by my doctors that I would never be able to have children of my own. This devastated me so much, I left my marriage and went away thinking of at least finding employment which would be satisfying. To my great delight I found a job in SOS Children's Villages, doing what I had always wanted to do - raise children!

Q What is it like to be an SOS mother?

A It's a tough job but a truly amazing one. My children love me. I truly love my children too, just like they were my very own. What kind of job will give you that kind of satisfaction?

Q What are the toughest challenges and how do you handle them?

A In the beginning, I felt tense and overwhelmed with having to deal with some of the challenging behaviour in children. I wasn't sure what to do. So I began to read about it, and make use of the trainings we get every now and then. I also was so happy to have access to the older mothers and other caregivers in the community. I would talk to them and learn from their experience and this reading, studying and sharing experiences helped me every time.

Q What are your best memories and moments?

A One of my daughters wrote an article called "The Mother of Supermen", which won a national literary award from the Government of Hanoi, for the best piece on motherhood. To think she got this award writing about me, really makes my heart explode with pride and joy.

There are many other moments of pride and joy, but some I cannot forget. When three of my children got top jobs, when another three passed out of university, when they make poems and songs about me and sing them to me on my birthday, when they come back to visit after they have left, these are especially beautiful moments.

Q What do you think about the family-like care model of child rearing which you are now doing through SOS Children's Villages?

A I have 19 years of experience as a mother. I have raised 15 children. I think raising children in a loving environment is the key. Family-like care means we have family-like relationships and everyone feels they are loved and needed. Growing up being loved means they learn to face life confidently and positively and one day I know they will know how to have loving homes too and raise their own children with love. This is what this model does.

Keeping SOS mothers on the cutting edge of knowledge and skill

In 2017, we adopted the Mothers' Training Curriculum Framework for Asia,¹¹ which aims to build the capacity of our core caregivers in the changing context to ensure quality care for the children in our care. The framework sets a minimum quality standard for mothers' training in the Asia region and provides a tool for the member associations in Asia to conduct trainings as per their local requirements. This also captures the best practices from the member associations to replicate them in all the member associations in Asia.

Based on the above framework, SOS Children's Villages around Asia provide regular state-of-the-art training for the SOS mothers and aunts. Designed with Asian realities in mind, these trainings capacitate mothers on a wide range of current and relevant topics. Trainings are also both knowledge and skills based, constantly providing new techniques they need on a day-to-day basis. First level trainings are provided to SOS aunts who in some member associations must undergo an initial six-month training and hands-on engagement for two years before they graduate to becoming an SOS mother. In service, mothers are required to attend regular trainings and refresher courses to

upgrade their skills and equip themselves with tools and knowledge to raise young children in constantly changing realities.

Trainings aim to enable the mother not just to run her home efficiently and effectively but also to have the knowledge, skills and confidence to teach, supervise, mentor, guide and grow alongside her children. In addition, latest information on application of child rights and new policies and procedures are also updated. A mother must possess a wide range of knowledge and skills. Trainings equip her in child rights and protection issues, issues in child safeguarding, in emergency preparedness, child and adolescent development, communicating with growing children, and other psychosocial issues. She is also provided with hands-on skills building in home making, health and hygiene, food preparation and nutrition and a host of other topics which will enable her to run a home with four to eight children and raise them into exemplary self-reliant adults.

Sessions are always delivered by the most competent professionals and often, senior retired mothers contribute very valuable insights and applications to SOS family realities that no one else can know other than an SOS mother. In the recent past, we have introduced online learning platforms and courses which mothers can access for virtual learning.

¹¹ SOS Mothers' Training Curriculum Framework for Asia (India: SOS Children's Villages International Office Asia, 2017).

Most member associations have set up National Training Centres at SOS Children's Villages to provide high quality ongoing training for mothers. In some countries, this high-calibre mothers' training has been recognized by the government as well, with the governmental seal on SOS mothers' training certificates. Some others are working towards obtaining national vocational certification for the mothers' training programme, which would pave the way for the SOS mother profession being officially recognized.



We now understand that the best way to reduce conflict is not to scream, but to try to create mutual respect and trust. It can be about small things, like saying 'you look beautiful today'. If we want respect, we must give respect. If we want the children to listen to us, we must listen. And if we want our children to trust us, we must trust them.

An SOS mother



A training facilitator demonstrating how to dress an infant, at a training conducted for the mothers of SOS Children's Villages Indonesia

Other social workers in the SOS Children's Villages

We are also ever proud of and grateful for the community of care professionals in the children's villages who, like the mothers, also nurture and sustain the families. Each child is taught, supervised, and guided individually. This is the collective responsibility of the village directors, educators and other social workers who play a very significant role in the life of the children's village and in the life of each individual child. While the central caregiver in the SOS families in Asia has always been the SOS mother, the role of a father figure is often played by the male village directors and sometimes by other male co-workers. They provide the nurture, guidance, and father perspective to growing children and also models the role of a father which they would need to help shape children's own concept of family life. These crucial personalities also commit to regular training and upskilling so they are always abreast or ahead of the challenges they face in co-parenting a whole generation.

An educator from SOS Children's Villages Indonesia consoling an anxious child, just like a father would



Mothers' retirement facilities

SOS mothers retire only from their work, but they never really leave us. While their responsibilities cease with retirement, their relationships as mothers are treasured forever. When tired mothers step aside to rest, that is when we as SOS family take over to give back to them who have given so much of themselves for so long.

Mothers' retirement facilities are the expression of reciprocal care. The facilities, which are located in SOS Children's Villages themselves, provide a home to retired mothers for the rest of their lives. In a touching demonstration of the circle of life, older mothers, young mothers in service and children get to live alongside each other in safety, dignity and in a caring environment.


544

**MOTHERS HAVE RETIRED
FROM THE VOCATION OF SOS
MOTHERHOOD IN ASIA, BY 2020**

(Data as on December 31, 2020, excluding member associations in China, Japan and South Korea)



Chandra Kala Thapa from SOS Children's Villages Nepal has the distinction of being one of the longest serving mothers in the global SOS Children's Villages organization. Chandra has devoted 40 years of her life to care for children at SOS Children's Village Gandaki, a village located in the city of Pokhara in Central Nepal. Over that time, she has raised 35 children – 22 boys and 13 girls. She raised seven of these children from the time they were babies. Chandra retired in 2019, at the age of 60. She was one of the winners of the Helmut Kutin Award 2019, an award that honours the commitment and dedication of SOS caregivers.



As a learning organization, we are always looking for new ways to strengthen the individual development of children and young people in alternative care, and to ensure that the care that we provide through each care setting serves the best interest of each individual child and young person. These are some of the efforts we are taking in Asia to achieve this.

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Alternative care of tomorrow



A grandmother who is supported to look after her three grandchildren under the family strengthening programme of SOS Children's Villages Sri Lanka, promoting kinship care

- We are strengthening the linkage between our family strengthening programme and kinship care programme. Many of the extended families of the children live in poverty and face challenges to survive. Placing another child in the family is an additional burden to them. However, the provision of support for income generation through the family strengthening programme, the separation of the child from its extended family is prevented.
- We are also in the process of developing a regional framework for our kinship care programme in Asia, based on the learning and evidence of its implementation in our programme locations.
- SOS Care Promise prioritizes social integration of SOS families to enable children under our care to become self-supporting and contributing members of society. In 2019, Asia region participated in a process where a tool on social integration was tested in two programme locations in SOS Mozambique. We will soon be implementing the learning from the pilot project in the region.
- To establish a continuous process of reflection and adaptation, SOS Children's Villages has developed the SOS Care Promise self-assessment tool, which enables each SOS Children's Village to reflect on the quality of services and to identify areas of improvement as well as specific actions to increase quality. According to this tool, all programme locations in Asia assess themselves twice annually and incorporate the findings in the member associations' action plans.

We are excited about the future and our own journey of discovery in a continuously changing landscape of alternative care provision.

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SOS mother Kanittha Kaisin and her children bonding over music and laughter, at SOS Children's Village Phuket, Thailand



A family from SOS Children's Village Ulaanbaatar,
Mongolia, outside of their family house



**SOS CHILDREN'S
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